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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop Amendment, Commissioner For Patents, P.O. Box 1450, Alexandria, 22313-1450 on October 22, 2007.

Raymond A. Joao

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT : RAYMOND A. JOAO

SERIAL NO.: 09/987,226

FILED : NOVEMBER 14, 2001

FOR : APPARATUS AND METHOD FOR PROCESSING AND/OR FOR

PROVIDING HEALTHCARE INFORMATION AND/OR

HEALTHCARE-RELATED INFORMATION

EXAMINER : L. NAJARIAN

GROUP : 3626

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

10/24/2007 CNEGRI 80000004 69987226

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188.88 UP

INFORMATION DISCLOSURE STATEMENT

Sir:

Pursuant to 37 C.F.R. §1.97 and §1.98, Applicant respectfully requests that the documents listed on the attached INFORMATION DISCLOSURE STATEMENT BY APPLICANT forms (Substitute for form 1449/PTO) (8 pages) be made of record and be considered in connection with the examination of this

application. A copy of the non-patent reference, cited on page 8 of 8, is submitted herewith.

A Credit Card Payment Form for \$180.00, for payment of the required fee for this Information Disclosure Statement, is submitted herewith. A Fee Transmittal Sheet (in duplicate) is also submitted herewith.

Entry of this Information Disclosure Statement is respectfully requested.

Respectfully Submitted,

Raymond A. Joao Reg. No. 35,907

- Copy of non-patent reference cited on page 8 of 8;
- Credit Card Payment Form for payment \$180.00 for the required fee;
- Fee Transmittal Sheet (in duplicate) for the payment of the fee; and
- Return Receipt Postcard

October 22, 2007

Raymond A. Joao, Esq. 122 Bellevue Place Yonkers, New York 10703 (914) 969-2992

PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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s	pursuant	to the	Conso	lidated	Appn	oprial	tions	Act,	2005	(H.R	. 481	8
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FEE TRANSMITTAL For FY 2008

XXXApplicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Complete if Known							
Application Number	09/987,226						
Filing Date	NOVEMBER 14, 2001						
First Named Inventor	RAYMOND A. JOAO						
Examiner Name	L. NAJARIAN						
Art Unit	3626						
Attorney Docket No.	RJ371						

METHOD OF PAYMENT (check all that apply)									
Check XXX Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: Deposit Account Name:									
For the above-ident	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
	additional fee R 1.16 and 1.	(s) or underpayme	ents of fee(s	s) Credi	it any overpay	ments			
WARNING: Information on the	is form may be	come public. Cred	it card infon	mation should r	not be included	on this form. Pro	ovide credit card		
information and authorization FEE CALCULATION	n on PTO-2038								

					TION FEES				
Application Type	Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	imall Entity Fee (\$)	Fees Paid (\$)		
Utility	310	155	510	255	210	105	•		
Design	210	105	100	50	130	65			
Plant	210	105	310	155	160	80			
Reissue	310	155	510	255	620	310			
Provisional	210	105	0	0	0	0			
2. EXCESS CLAIM FE	ES			•			Small Entity		
Fee Description Each claim over 20 (including P	aiccuar)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25		
Each independent cla			ues)			210	105		
Multiple dependent						370	185		
Total Claims			Fee P	Fee Paid (\$)			pendent Claims		
		_ , ×	_=			<u>Fee (\$)</u>	Fee Paid (\$)		
HP = highest number of tota indep. Claims	ciaims paid to Extra Clain	, ,		aid (\$)					
3 or HP =		x	_=						
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)									
		•	•	•	URE STA	АТЕМЕНТ	FEE \$180.00		
Other (e.g., late filing surcharge): INFORMATION DISCLOSURE STATEMENT FEE \$180.00									

SUBMITTED BY Registration No. Signature 35,907 Telephone 14-969-2992 (Attorney/Agent) Date /0/22/07 Name (Print/Type) RAYMOND. JOAO

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.